



10-20-04

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## EXPRESS MAIL CERTIFICATE

"Express Mail" Label No. : EV 463 356 077 US

Serial No. : 10/812,726

Applicant(s) : Kayvan Najarian et al.

Filing Date : March 30, 2004

Title : **METHODS AND SYSTEMS FOR GENE  
EXPRESSION ARRAY ANALYSIS**

Examiner : Zhou, Shubo

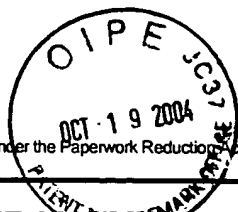
Group Art Unit : 1631

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Supplemental Information Disclosure Statement  
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PTO/SB/08A;  
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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/812,726
Filing Date	March 30, 2004
First Named Inventor	Kayvan Najarian et al.
Art Unit	1631
Examiner Name	Zhou, Shubo
Attorney Docket Number	46872-293662

Total Number of Pages in This Submission

## ENCLOSURES (check all that apply)

- |  |  |   |
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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Technology Center (TC)<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>See Remarks</b> |
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm  
or  
Individual name

Cynthia B. Rothschild, Esq., Reg. No. 47,040, Kilpatrick Stockton LLP

Signature

Date

10-19-2004

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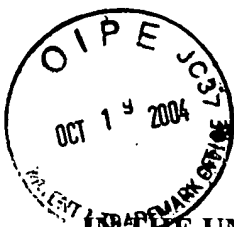
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EV 463 356 077 US

PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application of : Kayvan Najarian et al.  
Serial No : 10/812,726  
Filed : March 30, 2004  
For : Methods and Systems for Gene Expression Array Analysis  
Examiner : Zhou, Shubo  
Art Unit : 1631

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Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

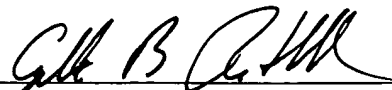
Pursuant to 37 C.F.R. §§ 1.56, 1.97, and 1.98, Applicants submit herewith on Form PTO/SB/08A a listing of one document known to the Applicants and/or their attorney. Applicants respectfully request consideration of the cited document and making the same of record in the prosecution of the above-identified application. In so doing, Applicants do not waive any rights to appropriate action to establish patentability over the listed document should it be applied as reference against the claims of the present application, or to establish that such reference is not prior art. A copy of the non-patent literature is enclosed and labeled for identification purposes.

This statement should not be construed as a representation that more material information does not exist or that a search of the relevant art has been made. It is respectfully requested that the reference listed on the attached form PTO/SB/08A be expressly considered by the Examiner, made of record in the application, and appear among the "References Cited" on any patent to issue therefrom.

This Supplemental Information Disclosure Statement is being submitted prior to the mailing of a first substantive Office Action in this application, and, therefore, no certification or fee is required (37 C.F.R. § 1.97b(3)). However, should any fees be due, the Commissioner is authorized to charge such fees to Deposit Account No. 16-1435. A duplicate of this sheet is attached for that purpose.

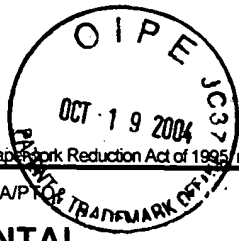
Respectfully submitted,

Date: 10-19-2004

  
\_\_\_\_\_  
Cynthia B. Rothschild  
Reg. No. 47,040

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46872-293662



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Substitute for form 1449A/PTO

**SUPPLEMENTAL  
INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet 1 of 1

**Complete if Known**

Application Number	10/812,726
Filing Date	March 30, 2004
First Named Inventor	Kayvan Najarian et al.
Art Unit	1631
Examiner Name	Zhou, Shubo
Attorney Docket Number	46872-293662

**U.S. PATENT DOCUMENTS**

Examiner Initials *	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number - Kind Code <sup>2</sup> (if known)			
		US-			
		US-			

**FOREIGN PATENT DOCUMENTS**

Examiner Initials *	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup> - Number <sup>4</sup> - Kind Code <sup>5</sup> (if known)				

**NON PATENT LITERATURE DOCUMENTS**

Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
	1	JOLLIFFE, I. T, Principal Component Analysis, New York: Springer-Verlag, 1986	

Examiner  
SignatureDate  
Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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